

State of Washington
Application for a Water Right Permit

☐ SURFACE WATER ☒ GROUND WATER
☒ Permanent ☐ Temporary ☐ Short Term

For Ecology Use
(Date Stamp)

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DEPT. OF ECOLOGY
FISCAL & BUDGET

Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE **MINIMUM FEE** OF \$50.00 PAYABLE TO
THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: Eltopia Water Association / Ivan Halverson	Phone No: 509-297-4275	Other No:
Address: 201 Tacoma St.		
City: Eltopia	State: WA	Zip: 99330
Email Address (optional): ihalvey@hotmail.com		

Contact Name (if different from above): Christine Batayola – Harms Engineering, Inc.	Phone No: 509-547-2679	Other No:
Relationship to Applicant: Engineer		
Address: 1632 W. Sylvester St.		
City: Pasco	State: WA	Zip: 99301
Email Address (optional): cbatayola@charterinternet.com		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: Continue to supply water to the Eltopia Water Association service area.. System has been in operation since the early 1900's.

Anticipated length of time to complete your project: The system is in service now, improvements and new well to be complete within 3 years.

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only)		Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
	<input type="checkbox"/> Cubic Feet per Second (CFS)	<input checked="" type="checkbox"/> Gallons per Minute (GPM)		
Domestic supply including irrigation	300		50	Continuously
TOTAL:				

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

For Ecology Use	APPLICATION NO: <u>G3- 30603</u>	SEPA: <u>Exempt</u> / Not Exempt
	Fee Paid: <u>50.00</u>	Check No: <u>20676</u> ECY Coding: 001-001-WR1-0285-000011
Date Returned	By	Priority Date <u>10-2-2009</u> By <u>K. Ryf</u> WRIA: <u>36</u>

Section 3. POINT OF DIVERSION OR WITHDRAWAL

Complete A or B, and C below

A.) If Surface Water Source	B.) If Ground Water Source
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: <u>Two wells: one is existing and the second isn't constructed. Second source is required by DOH due to high arsenic in existing well.</u> Well dia. & depth: <u>8"x120' exst. / 8"x700' proposed</u> Number of proposed points of withdrawal: <u>2</u> Do you have an existing well? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. <u>ABR 650 no well log or pump test</u>

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
Not Parcelled	NW	NE	11	11N	30E	Franklin
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>450</u> Feet (<input type="checkbox"/> North/ <input checked="" type="checkbox"/> South) and <u>1370</u> feet (<input type="checkbox"/> East/ <input checked="" type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input checked="" type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/>) corner of Section <u>11</u> .						
Parcel No.	¼	¼	Section	Township	Range	County
	NW	NE	11	11N	30E	Franklin
Lot(s)	Block(s)		Subdivision			
If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner: _____ feet (<input type="checkbox"/> North/ <input type="checkbox"/> South) and _____ feet (<input type="checkbox"/> East/ <input type="checkbox"/> West) from the (<input type="checkbox"/> NW <input type="checkbox"/> SW <input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/>) corner of Section_____						

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☒ NO
If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO
Provide the owner name(s), address, and phone number: Existing well is on Burlington Northern Railroad property and the location of the proposed well has not been determined.

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

Eltopia Retail Service Area, see attached map.

¼	¼	Section	Twp.	Range	County	Parcel No.
		11	11N	30E	Franklin	Multiple

Do you own all the lands on which the proposed place of use is located? ☐ YES ☒ NO.
If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO
Provide owner name(s), address, and phone number: Members of the association own their own land and there are multiple owners of the properties within the Eltopia Retail Service Area.

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NO
If yes, provide the water right and/or claim numbers: Surface water rights: S3-01299CWRIS and S3-026480CL

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): Until the new well is constructed, the existing well and its 10 hp submersible pump will continue to pump into the existing 12,000 gallon storage tank. Currently the system is gravity fed by the storage tank. Once the new well is constructed it will pump (estimated at 15hp) into a new 40,000 gallon concrete storage tank. The distribution system will be fed by a new booster station to ensure adequate pressures. The existing well will remain online as an emergency source. In addition, the project will add service meters to all connections.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

Complete A or B, and C below

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: <u>30 ERU</u>	Present population to be served water: <u>64</u>
Type of connections: <u>24 homes and 1 church</u> (e.g., home, recreational cabin)	Estimate future population to be served: <u>85</u> (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, date plan was approved ____/____/____ Water System Number: <u>#23240</u>	
Name of water system: <u>Eltopia Water Association</u>	
Are you within the service area of an existing water system? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: _____ _____ _____ _____	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = _____ ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? ☐ YES ☐ NO

Other Proposed Farm Uses

Describe all proposed uses: _____

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☒ YES ☐ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☒ NO

Will the water depth be 10 feet or more? ☒ YES ☐ NO

If you answered yes to any of the above questions, please describe: A reservoir will be constructed to provide standby storage, equalizing storage, and operational storage for the Eltopia Water Association. The proposed reservoir is 20 ft diameter and 20 ft tall.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: From Highway 395 turn west onto Eltopia West Road, turn right onto 5th St., turn left onto Seattle Ave. Existing well house is north of the grain silo and across the railroad tracks.

Site Address: No address for well site.

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Ivan Halverson
Print Name
(Applicant or authorized representative)

Ivan Halverson
Signature

9-16-09
Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

Date

Print Name
(Landowner of Place of Use)

Signature

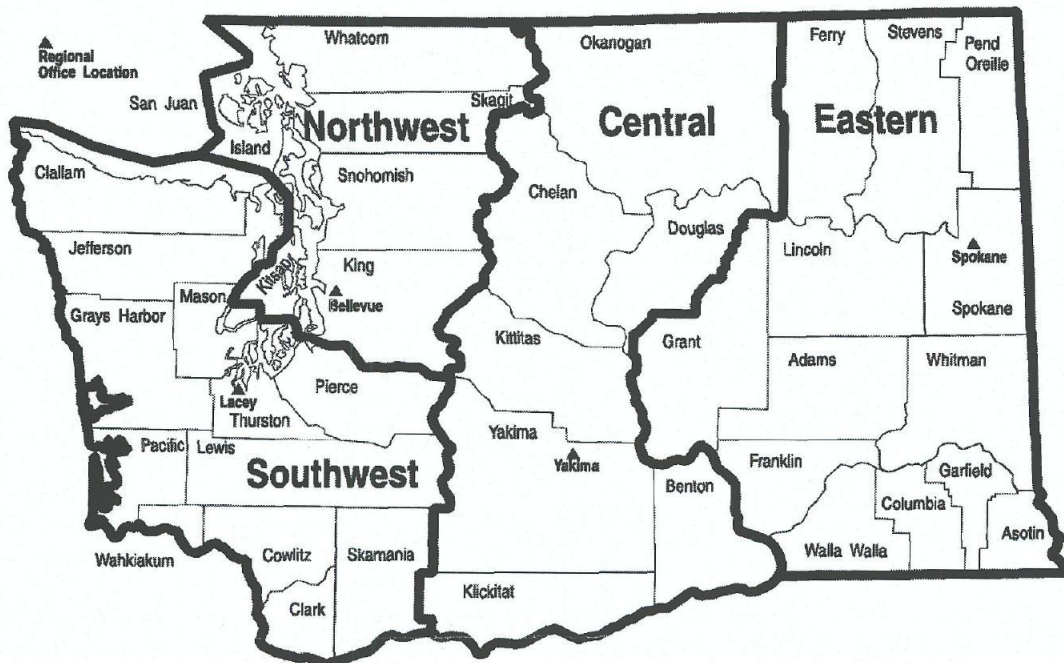
Date

Submit your application to: DEPARTMENT OF ECOLOGY
CASHIERING SECTION
PO BOX 47611
OLYMPIA, WA 98504-7611

Please check the region in which your proposed project is located.

☐ Southwest ☐ Northwest ☐ Central ☒ Eastern

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300

Northwest Regional Office: 425-649-7000

Central Regional Office: 509-575-2490

Eastern Regional Office: 509-329-3400